

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CORY CHAPMAN
ROCKSCAPES
2338 RIDGEWOOD WAY
BOUNTIFUL UT 84010

2. Article Number

(Transfer from service label) 7002 0510 0003 8602 8659

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

mc-2005-03-06-01

5/035/029

8/18/05

UNITED STATES POSTAL SERVICE

DIST SVC 9/01/2005

31 AUG 2005 PM 1 1

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

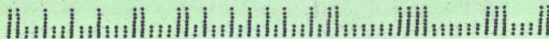
JOELLE BURNS
DIVISION OF OIL GAS & MINING
1594 WEST NORTH TEMPLE SUITE 1210
P O BOX 145801
SALT LAKE CITY UT 84114-5801

RECEIVED
SEP 01 2005

DIV. OF OIL, GAS & MINING

S/035/029, MC-2005-03-06-01, 8/18/05

801



U.S. Postal Service
CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

S/035/029, MC-2005-03-06-01, 8/18/05

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Stop work Conf
Letter

Postmark
Here

Sent To

CORY CHAPMAN

Street, Apt. No.;

or PO Box No.

2338 RIDGEWOOD WAY

City, State, ZIP+4

BOUNTIFUL UT 84010

7002 0510 0003 8602 8659

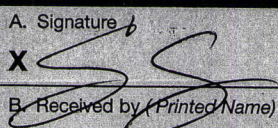
Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may **ONLY** be combined with First-Class Mail or Priority Mail.
- Certified Mail is *not* available for any class of international mail.
- **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: CORY CHAPMAN ROCKSCAPES 2338 RIDGEWOOD WAY BOUNTIFUL UT 84010		B. Received by (Printed Name) C. Date of Delivery	
2. Article Number (Transfer from service label) 7002 0510 0003 8602 8659		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, August 2001		Domestic Return Receipt 102595-02-M-1540	

MC-2005-03-06-01
5/035/029 8/18/05

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
S/035/029, MC-2005-03-06-01, 8/18/05	
Postage \$	Stop work Conf Letter Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To CORY CHAPMAN Street, Apt. No., or P.O. Box No. 2338 RIDGEWOOD WAY City, State, ZIP+4 BOUNTIFUL UT 84010	
PS Form 3800, January 2001 See Reverse for Instructions	

7002 0510 0003 8602 8659